Fore	DA-FMH n FmHA 194		PROJECT		Position 1 VATER AND W	ASTE DISPOSA	L	
(Ples	v. 10-91)			ND OTHER UT			_	
	(derect)	(guaranteed)				Case Number		
A .	APPLIC	ANT/BORROW	ER:		Address			(1)
Nan	ne.	(2)			AGGITTAL			
Stre	NO T		County			Zip Code	Congr	essional District
								(3)
	Tax-Exemp	t Public Body	Corporation	☐ Non-Profit	Indian Tribe	Dther		(Specify:
8.	SERVX	E TO BE PRO	VIDED Dor	nestic Water	Sewage Collect	ion 🗀 Sewage	Treatment	
(4)	☐ Solik	Waste Dispoi	ual 🔲 Storm D	rainage 🔲 Oth	er		(Specify)	
Ċ.		OAN/GUARAN	ITEED LOAN					
	☐ Dire		% Repsymen	nt (5) Yes		Guarameed Loan Interest rate	•	
	Type in		verty intermed			☐ Fixed	- '-	
		Principal Pay		Yeers		☐ Vanable ☐ Percent of Guara		%
	Maximu	m Repayment	Period Authorized	by State Law	Y88/3	☐ Percent of Guara	1196	
D.	SECUR	TY: (Check the	appropriate item(s	w (7)				
	☐ Gen	eral Obligation	Bonds-Amount \$		Specia	i Assessments – Amo	ount \$	
		enue Bonds—/			☐ Notes	Amount \$		-
	☐ Stat	utory Lien			Assign	ment of income		
	☐ Rea	Estate	acres	mon	gage 🗆 Other	(Explain)		
	□ Che	ttel Mortgage d	or Financing States	nent				
- -	LAND	ND RIGHTS:						
3) E		arb Hiorris.	Fee Simple		Loase	Purchase Pric	•	Present Market Value
_								
10	pe econire	: (ACRES)						
	w owned: (/	1						
Des	scribe other	r rights: (such i	ss water rights or r	ights-of-way)				
<u>-</u>	DEVE	DEMENT COS	T SUMMARY (Tota	l Project Costs): ()	Identify source in C	olumns (C), (D) & (E)	!	
		(B) Applicant	Other	Other	Other	FmHA	FmH	A Total Project
	(A) Item	Contribution	(C) Funda	(D) Funds	(E) Funds	(F) Grants	(G) Lo	e n (H)
1. 1	Water		*		*	s	s	
2.	Sewage Collection							
					 			
J. 3	Sewage Treatment							
4.	Solid Waste					Ì	ŀ	
5.	Storm						1	
	Orainage			<u> </u>			 	
6. 1	Other	†			1		ļ	
_	TOTAL C				1			
<u>/.</u>	TOTALS	<u> </u>	 	 	+	 	ـــــ ــــــ	
_		Source					Fm	HA 1942-45 (Rev. 10-
ירושי	URE FO)D		·····				
		巫		RD Instru	ctions 1942_	A 1980-I and	RUSI	nstruction 1780
AR 4								
ARA	<u> </u>		•	1512 Tilsti us	LIONS 12-12-			

Engineer, and Community Programs Chief or Community

and Business Programs Chief.

. UMBER OF COPIES

Original and three.

SIGNATURES REQUIRED

Original by District Director, FmHA Engineer, and Community Programs Chief or Community and Business

Programs Chief. All copies should be conformed.

DISTRIBUTION OF COPIES

Original to be filed in District Office case file, one copy to

County Office, one copy to State Office, and one copy to

National Office.

Used for all Water and Waste Disposal Loans, Grants and Guaranteed Loans, Community Facility Loans for utility type projects, Rural Business Enterprise Grants/Television Demonstration Grants for utility type projects and Business and Industrial Loans when applicable. For other utility type projects, the form may be modified to delete reference to Water and Waste Disposal and to add the appropriate information for the type of project being financed.

Instructions for Preparation

- (1) Use State and County codes and taxpaver identification number. Must be 15 digits.
- (2) Use the legal name of the applicant/borrower as stated in its Articles of Incorporation or enabling legislation.
- (3) Show the Congressional District or Districts in which the facility will provide service.
- (4) Check only one block: except in those cases where a combination water and sewer project is being financed, the applicable blocks should be checked. In all other cases, if more than one facility is being financed, prepare a separate Project Summary for each facility and check only the applicable block.
- (5) Show the total repayment period including any deferment period from the date of loan closing.
- (6) Show the number of years in which principal payments will be deferred.
- (7) Show all items of security that will be required.
- (8) Complete applicable sections only for facility for which this Project Summary is being prepared. Describe other rights, if any, now owned or to be acquired (water rights, etc.)

	WITH PROPOSED SYSTEM (Include of	SEUTHERS PROBLEM THERES VALUE FOR I	stating system): (Describe)	
	LIGER COLOREDATION			
H.	USER CONSIDERATION:			(11)
			(10)	• • • •
		Before suprovement	After Improvement	After improvement (Extensions/Additions only)
(A)	Total Number of Users	(Existing Systems Only) Water Waste	(First Full Year of Operation) Water Waste	(First Full Year of Operation) Water Waste
(9)	(1) Residential Users			
(12)	(2) Other Users (Based on Equivalent Dwelling Units) (EDU)			
	(3) Total Equivalent Users (EDU) (Sum of 1 and 2)			
(13)	(4) FmHA Debt Per EDU			
	(5) Total Debt Per EDU			
(B)	Residental Users			
	(1) Minimum Monthly User Cost			
	(2) Average Monthly User Cost			
	(a) User Fees (b) Tax Assessments			
	(c) General Obligation Bonds			
	(3) Average Monthly User Cost for Similar Systems			
	(4) Connection Fees and Other Charges Per User			
	REVENUE PROJECTION:			
	Basis for Annual Income Estimate: Rate Schedule:			
	(A) Water-Residential size service			
	Mininum bill	tor		ations
	Next	gallons for \$	per	galions
	Next	galtons for \$	per	gations
	Next.	pallons for \$	per	gallons
	Next	gallons for \$	per	gallons
	Next	galions for \$	per	gallons
	All over	gallons for \$	per	gallons

- (9) The number of users shown in H (A) (i) must agree with the number shown in item M 5.
- (10) The after improvement Wate, and Waste columns will be a cumulative total of the before improvement columns plus the new improvements.
- (11) Complete only when feasibility is determined on an extension or addition to an existing system and not on the entire system.
- (12) Equivalent Dwelling Units are based on the level of service provided to a typical rural residential dwelling.
- (13) The figures in H (A) (4) and (5) are to be based on the security given for the loan or in the case of a grant only the system tinanced. For example, a municipality issues a water revenue bond to secure a loan to improve its water system, these figures would be for the total debt on the water system.

(B	i) Water-Other (14	١		3
,-	Mininum bill	•		
			per	_
	Next	gellons for \$	per	gallons
	Next	gallions for \$		galions
	Next	galions for \$	per	galions
	Next	galions for \$	per	gallons
	All over	gailons for \$	per	gallons
	Connection Fees or Othe	r Charges Per User		
<u>D</u>	se and income Estimate:			
(C	Water			
	users @	gallons @ \$	per user=\$	month y
	users @	gallons @ \$	per-user = \$	month:y
	users @	galions @ \$	per user=\$	monthy
	users @	gallons @ \$	per user = \$	monthly
	users @	gallons @ \$	per user = \$	monthly
	users @	gallons @ \$	per user = \$	monthly
	users @	galions @ \$	per user = \$	monthly
			per user = \$	
			per user=\$	monthly
		gallons @ \$	•	monthly
	Total = \$	monthly x 1.	2 = \$	_annually
_	asis for Annual Income Esti ate Schedule:	mate:		
) <u>w</u>	aste Disposal (Explain the v	vaste disposal rates and charges)		
M	inimum bill \$	(15)		
				· · · · · · · · · · · · · · · · · · ·
	Income Estimate:			
_		users Ø \$	oer user = \$	monthly
		users @ \$		monthly
		users @ \$,
			per user=\$	
		users @ \$	per user≖\$	monthly
			per user = \$	monthly
_		users @ \$		

- (14) Complete for other users or attach a copy of proposed rate schedule. If additional space is needed attach additional sheet to this form.
- (15) Show the rates and charges for the waste disposal system and the basis for the charges. Distinguish between rates and charges for residential service or other than residential service, where appropriate.

		(16)	After im (First Full Ye	sprovemen	ts			(Exter	ter Improve nsione/Addit uit Vest of	
			Water		Waste			Water	UM 1982 UT	Waste
	Total Annual Revenue					_				
	(a) O&M Costs									
	(Less Depreciation	•								
	(b) Capital Improveme (c) Debt Service	mis		-			_			
	(d) Reserve			-						
	(e) Other									
	•									
	Total Annual Costs			_						
	Baiance Available (Revenue Minus Costs)					_	*****	· · · · · · · · · · · · · · · · · · ·		*
K.	GENERAL OBLIGATION	BONDING CAPA	CITY:							
	Total Capacity \$	unt mahinnan		^	mount U	Inobligat	ed \$	· · · · · · · · · · · · · · · · · · ·	(17)	
	Planned use of any amo	-								
<u> </u>	EXISTING LONG-TERM			(D)	(E)	<u>(F)</u>	(G)	(H)		
	(18) Owed to	(B) Purpose	(C) Balance Owed	Amort- ization Period	Date Payment Due	Final Due Date	Annual Payment	Interest Rate		(I) Security
1.										
2.		<u> </u>				ļ				
3.					-	<u> </u>		ļ		
4.					ļ					
5.		-		-				-		
6.	*** - * · · · · · · · · · · · · · · · ·			a de de la constante de la con	. 4 12-11.8	17.275a.11			PROTEIN TO	
	TOTAL					5 ST. 6			airi t	
M.	FACILITY CHARACTER		Project)							
	a. Population served b. Median Househole		(19)		•		sers in the setropolitan		irea	
	b. Median Househor	2 HILUMING #	1137	u.			old Income			
	2. Water Supply System		1.6	☐ Stre					☐ Purchas	
	Water Source: Adequacy:	□ West L.	Spring	LJ Stre	a rn	LJ III	npou ndme n	4 .	L Purchas	
	Quality:									
	If being purchase	d, give cost per 1,	000 gallons: \$	š						
	3. Type of Sewage Trea		itabilization La	-			Lagoon		☐ Mec	hanical Plant
	If Sewage Treatment		and Treatmer		L	rreatm	ent by Con	m a Ul	LIUM	Specify Specify
	Method of Disposing									
		sal is by Contract,	Give Cost: _							
	II SOIIG WASTE DISDO									
	5. Type of Users									
	5. Type of Users	ential Users in the Black, Not of		: n Indian o					n or	TOTAL

- (16) The figures to complete this section should be taken from Form FmHA 442-7. "Operating Budget". The project must have a positive cash flow.
- (17) Complete when general obligation bonds or special assessments will serve as a security for the proposed loan.
- (18) Show all existing long-term indebtedness not to be refinanced regardless of the purpose for which it was incurred. The water and sewer indebtedness should be identified separately if a grant is involved.
- (19) Information on median household income for the project service area and statewide nonmetropolitan income will be determined as outlined in <u>FmHA Instruction 1942-A</u> and made available to the District Director by the State Office or this block will be completed by the State Office during the review of the Project Summary.

N.	APPLICANT REPRESENTATIVES:	
	President. Chairman, etc.: (Name and Title)	
	Address:	Phone No
	Contact Person: (Name and Titlo;	
	Address:	Phone No
	Bond Course: (Name)	
	Address:	Phone No
	Legal Counsel: (Name)	
	Address:	Phone No
	Architect/Engineer (Name)	
	Address:	Phone No
	Financial Advisor. (Namn)	
	Address:	Phone No
O.	LENDER (Name) (Guaranteed loans only)	Percent of Guarantee Requested
	Lender's Address	
	Conlact Person	Telephone Number
1	If proposed lender is not a local lender, explain how such lender will make and service the loan	
	· · · · · · · · · · · · · · · · · · ·	
2	Lender's financial interests in the borrower or vice versa. (If any conflict, explain)	
3.	(1) Lender's plan for funding the loan (1) Lender retains entire loan (1) YES (1) NO (2) If lender plans to utilize secondary market for guaranteed portion of loan. <i>(Indicate by check)</i> Assignment No of Assignments : Multi-Notes No of Notes ; Participatin	
	(3) Lender's plans for sale of unguaranteed portion through participation	

	Hea FmHA gueranteed any program loan to this lender? YES NO
	If yes, comment on quality of loans previously submitted and adequacy of servicing by lender in carrying out his agreements.
5.	How long has lender financed this borrower?
P.	ENVIRONMENTAL REVIEW AND IMPACTS:
	1. Form FmHA 1940-22 Completed (Categorical exclusion)? 3. Environmental impact statement required?
	2. Form FmHA 1940-21 completed (Class / assessment)? If Yes
	☐ Class II Assessment? Draft Statement Completed (Date) ☐ Yes ☐ N
	Public notification completed?
	4. The following resource(s) apply to the assessment:
	Floodolain Wetland Important Farm Land Prime Rangeland
	Prime Forest LandArchaeological SurveyHazardous Waste
	Sole Source Aquifer Costal Barrier Historical Preservation
	Endangered/Threatened Species
	5 The environmental assessment or impact statement resulted in the selection of alternative courses of action other than that original
	requested by the applicant: 🔲 Yes 🔯 No
	6. The environmental assessment or impact statement resulted in a mitigation measures(s) being required: 🔲 Yes 💢 No
	if yes, summarize:
_	
Q.	DOES THE APPLICANT HAVE A WORKABLE PLAN FOR:
	1. Collection of Definquent Accounts: Yes No 2. Establishing Records and Maintaining Management and Audit Reports: Yes No
,,	E. Louis and T. Control of the Contr
(20)	3. Facility Maintenance:

- (20) Check the applicable block for each item. Any "No" answers should be explained in sections $R,\ S$ and/or T.
- (21) Include recommendations regarding the loan or grant and any significant requirements recommended for loan or grant approval. Also include documentation on the availability of other credit, determination of appropriate interest rate, and information on unusual conditions.

R.	DISTRICT DIRECTOR'S RECOMMENDATIONS:	
т.	profite and the control of the contr	
	(21)	
	(Date)	(District Director)
 S.	(Daie) FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS A	
S .	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS /	
S .		
S .	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS /	
S .	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS /	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S .	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S .	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FMHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS	
S.	FmHA ARCHITECT/ENGINEER'S WRITTEN ANALYSIS (

- (22) Provide a thorough and detailed written analysis with recommendations of the technical synopsis and evaluation of the design criteria, proposed improvements, and cost estimate. The analysis should clearly establish that the facility is modest in size, design, cost, and that the design is in accordance with sound architectural and engineering practices. Specific recommendations should be provided to assist in developing the project.
- (23) Include any revisions to the recommendations in 21 or 22 above. Also include any other specific requirements recommended for loan or grant approval. The availability of other credit and a recommendation of loan or grant approval should be included.

T. COMMUNITY O	R COMMUNITY AND BUSINESS PR	OGRAMS CHIEFS RECOMMENDATIONS
	(23)	
	(Date)	(Community or Community and Business Programs Chief)
Copies of Form Emila Summary and are an i	· · · · · · · · · · · · · · · · · · ·	(Community or Community and Business Programs Chief) Emilia 443-16, "Association Project Fund Analysis", must be attached to the Project
Copies of Eggs. Emilé Summary and are an i	· · · · · · · · · · · · · · · · · · ·	
Copies of Engli-Emilia Summary and are an i	· · · · · · · · · · · · · · · · · · ·	
Copies of Form Emila Summary and are an i	· · · · · · · · · · · · · · · · · · ·	
Copies of Eggs. Emilia Summary and are an i	· · · · · · · · · · · · · · · · · · ·	
Copies of <u>Form Emilla</u> Summary and are an i	· · · · · · · · · · · · · · · · · · ·	
Copies of Eggs. Emilia Summary and are an i	· · · · · · · · · · · · · · · · · · ·	

-8- (Forms Manual Insert - Form FmHA 1942-45)